



**BUREAU OF
BUSINESS MANAGEMENT**
DIVISION OF PROCUREMENT SERVICES
2600 Bull Street
Columbia, SC 29201-1708
Telephone (803) 898-3501 Fax (803) 898-3505

September 5, 2006

Mini-Grant Application No. 30826-09/28/06-MAR

Closing Date: September 28, 2006

Time: 5:00 P.M.

Mini-Grant Application for Implementation of Community-Based African American–
Focused Infant Mortality Risk Reduction Program.

Mail Mini-Grant Applications to:

SC DHEC
Bureau of Business Management
2600 Bull Street
Columbia SC 29201
Attn: Michelle Robinson, CPPB

**Mini-grant Applications may be sent by *facsimile to 803-898-3505, US postal
service (mail) to the above address, or via *e-mail to: robinsma@dhec.sc.gov**

***The SC DHEC assumes no responsibility for unmarked, incorrectly marked
envelopes, partial faxes or undelivered e-mails being considered for award.**

An official authorized to bind the offeror to the terms of the grant application must sign
the application. **Applications must be submitted showing the above application
number.**

Questions concerning any part of this grant application should be directed to Michelle
Robinson, CPPB, Procurement Manager I (803) 898-3469.

*Closing the Health Gap on Infant Mortality-Community Risk Reduction
Project Application Cover Page*

Name of Organization _____

Address _____

City, State, Zip Code _____

Phone _____ Fax _____

Federal ID #: _____

Contact person for the project: _____

Signature of contact person for the project: _____

E-mail address of contact person for the project _____

Signature of Authorization _____

Funding amount requested for project: \$ _____

*****NOTE: PLEASE FOLLOW DIRECTIONS ON ALL PAGES OF THE APPLICATION.
PROPOSALS THAT DO NOT COMPLY WILL BE RETURNED AS “NON-
RESPONSIVE.”**

ACRONYMS

SC DHEC	South Carolina Department of Health and Environmental Control
CGIM	Closing the Health Gap on Infant Mortality

A. Preliminary Information

The South Carolina Department of Health and Environmental Control (SC DHEC) has been awarded by the US Department of Health and Human Services, one of four grants focused on reducing infant mortality and low birth weight among the African American population. SC DHEC Closing the Health Gap Initiative on Infant Mortality: African American-Focused Risk Reduction announces the availability of funds for fiscal year (FY) 2006-2007.

Infant Mortality in South Carolina and SC DHEC Region

Infant mortality is defined as a death that occurs during the first year of life. During the year 2000, nearly 70% percent of South Carolina infant deaths occurred within the first twenty-eight days of life. Between 1989 and 2000, the number of infants dying in South Carolina has declined from nearly 13 deaths to about 9 deaths for every 1,000 live births. Although infant death rates are improving in the state, minority infants, in particular African American infants, continue to be at an increased risk for illness and death during their first year of life.

During the period from 2001-2003, there were 121 infant deaths in the SC DHEC Region 6 (Horry, Georgetown and Williamsburg counties) for an infant mortality rate of 10.5 per 1000 live births. The state infant mortality rate was 8.8. Fetal deaths totaled 114. The racial disparity is striking for this region, as the infant mortality rate for white infants was 5.3 and 21.5 for African American infants.

The gestational period and the first year of life of a child are important stages in growth and development. Major factors in infant health are the health of the mother and the accessibility of quality primary health care. Mothers with early and continuous prenatal care are less likely to have low birth weight babies (less than 5.5 lbs.). Low-birth weight babies are more likely to have complications that may lead to death.

Purpose

Mini-grants from \$5,000 to \$10,000 will be granted to local community organizations and faith-based organizations targeting African Americans to address risk factors leading to poor birth outcomes and health outcomes of infants up to age one. Funds will support programs and activities that are evidence based in reducing the infant mortality in local communities.

Qualified Applicants

Qualified applicants are local community and faith-based organizations within Horry, Georgetown and Williamsburg Counties with non-profit status. Applications selected will be based on completeness, organizational capacity and anticipated effectiveness of the proposed project.

Partnerships:

Grantees are expected to identify, establish, and engage in partnerships to implement proposed activities. Forming partnerships with other organizations in the community will increase the available resources and expertise for community activities. For example, ***a sorority could engage local grocery stores to set up rotating displays of healthy food choices for women who are pregnant or planning a pregnancy.***

A. Grant Awards

October 16, 2006 is the targeted date for the announcement of the awards.

B. Contract Period and Budget Period

This application budget period is from the date of purchase order through June 30, 2007.

C. Payment Information

Upon receipt of the purchase order, the grantee may submit an invoice to DHEC for start-up costs based on estimates of expenditures for the first 30-day period. **Documentation of actual expenses against the entire amount of start up funds will be required by DHEC prior to submission of second and subsequent invoices.**

The grantee shall submit the second and subsequent invoices on a monthly basis for actual expenditures incurred during the previous month. These invoices will be for monies expended over the amount of the start-up funds received. The invoice will state the period in which the expenditures occurred.

Requests for payments should be mailed to:

SC Department of Health & Environmental Control
Georgetown County Health Department
531 Lafayette Circle
Georgetown, South Carolina 29440
Attn: Regina L. Nesmith

The invoice must include:

- A. Name and address of grantee
- B. Purchase order number
- C. Brief description of the activities
- D. Itemized listing of expenses incurred
- E. Period of services
- F. Total amount of invoice
- G. Attachment of original receipts

H. Monthly progress report *

***(All grantees are required to submit a monthly progress report. Invoices will only be processed upon receipt of the monthly progress report.)**

D. Instructions and Information needed to submit an application

An evaluation panel will review all applications. The amount of the award will be made according to the criteria requested on page 7. Completeness, organizational capacity and anticipated effectiveness of the proposed project will be considered as well.

E. Use of Funds:

Funds may be used to reimburse grant related activities. Cost related to program activities may include:

- Meeting expenses **(other than food)**.
- Travel (at the state rate: **currently** .445 per mile)
- Two (2) representatives to attend a mandatory one-day grant workshop and perinatal regional training. (Date and Time to be announced at a later date).
- Educational materials such as **pre-approved** books, curricula, models.
- Printing, postage, etc.

Funds are not intended to reimburse for food items nor office equipment including computers, printers, fax machines, etc. Funds may not be used to supplant existing program/projects. Funds may not be used for incentive items. Only pre-approved items that promote educational messages may be used.

Funds may be used for the expansion of existing relevant projects.

Program Activities

Evidence-based approaches that address county specific needs should be considered in project planning.*

The following are examples of activities eligible for funding.

- Implement activities to promote breast-feeding to perspective mothers and provide education on the benefits of breast-feeding for the baby and mother.

- Create innovative approaches to help preconceptional, pregnant and post-partum women and their household members to quit smoking or reduce use of tobacco products.
- Implement activities to improve access to services that promote healthy birth intervals-optimally 24 months-combined with education about ways to reduce the risks of childbearing.
- Implement activities that improve awareness, screening, diagnosis and treatment of STDs in women leading to a reduction of premature births.
- Offer nutritional/dietary management classes during pregnancy – (i.e. cooking demonstration classes, work with local grocery stores to organize grocery store tours) and other nutritional resources for pregnancy women.
- Work with local churches and community centers and/or other community agencies to host classes on self-care during pregnancy, childbirth education and post partum care, stress management, etc.
- Development of community coalition focused on prevention of infant mortality.
- Development of an early prenatal care campaign including frequency of doctor's visits and why this is important to having a healthy baby.
- Develop initiative that promotes father involvement in prenatal care and other support activities during pregnancy and the first year of life.

*(County data available through the CGIM Office at 531 Lafayette Circle, Georgetown, SC)

B. Application Questions

Instructions: Please respond to the following questions on a separate sheet of paper. Answers should be numbered to correspond with the questions in a narrative format. Responses should be single-spaced in 12-point font (preferably Times New Roman or Arial). The points available (on a 100-point scale) and the page allowances are listed next to each question.

1. **Statement of Need and Organizational Capacity** 10 points (1-page maximum)

Identify and describe the prenatal health and/or infant health concerns or needs that will be addressed by this project. This should include answers to the following questions:

- What needs or problems would be addressed by this project?
- What is the experience of the organization/agency in working with the identified population (pregnant women and infants to age one)?

2. **Project Description** 40 points (3-page maximum)

Your response should include:

- Describe the project selected for this grant and its target area(s).
- Identify the information that was used to determine the choice of activities (e.g. best practices, assessments/research, past experiences, etc.).
- Explain what methods will be used to ensure the initiative reaches the priority population(s), and how they will benefit from these efforts
- Describe the setting in which the intervention will take place (e.g. community, worksites, health systems, etc.)
- Describe the role of local partnerships in implementing the project.

3. **Goals and Objectives** 25 points (2-page maximum)

Identify the major goal(s) and measurable objectives of the intervention(s), and how they relate to an infant mortality risk reduction focus. Describe how objectives will be evaluated to determine whether the project met its goals and was successful, and include a proposed timeline for meeting objectives. Develop an action plan in the format attached (application page 10).

4. **Evaluation Plan** 10 points (1 page maximum)

Please explain how the project will be evaluated by addressing the following questions:

- How will the project successes, challenges and impact be evaluated?
- How will the project objectives be evaluated?

- Who will design and carry out the project evaluation?

5. **Project Impact and Continuation** 5 points (1-page maximum)

Explain how the project will make a difference in the lives of participants?

Describe the plan for how the project, if funded, would evolve in the future to include further development or refinement of the original project, expansion to additional areas/populations and future funding sources.

6. Application Budget (10 pts.)

Budget is for the 2006-07 fiscal year only, and should be clearly linked to the project goals, objectives and activities and include itemized expenditures where appropriate.

Itemized Categories	Budget Narrative
Personnel: \$	
(Include a brief job description)	
Travel: \$	
Supplies/Equip: \$	
Marketing (materials, printing, media): \$	
Contractual: \$	
Other (list below): \$	
In-Kind Support: \$	
TOTAL: \$	

Note: Funds must be expended as approved or have written approval for major revisions.

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
MINI-GRANT APPLICATION NO. 30826-09/28/06-MAR

ACTION PLAN WORKSHEET 2006-2007

Goal:

[illegible]

CGIM Grantee Training Workshop and Regional Update Meeting

CGIM Grantee Training Workshop and Regional Update Meeting will be held for all three counties (Georgetown, Horry and Williamsburg). These sessions are held to provide technical assistance and updates to funded community organizations. The invoice and reporting process will be the focus for the CGIM Grantee Training Workshop. **It is mandatory that grantees attend both sessions.**

APPENDIX

March of Dimes (MOD)

The mission of the March of Dimes is to improve the health of babies by preventing birth defects and infant mortality. The mission is carried out through research, community services, education and advocacy to save babies' lives. March of Dimes researchers, volunteers, educators, outreach workers and advocates work together to give all babies a fighting chance against the threats to their health: prematurity, birth defects, low birth weight.

www.marchofdimes.com

Project IMPACT (Infant Mortality Policy and Communication Tools)

The National SIDS & Infant Death Project IMPACT supports state and local infant death programs through sharing information, promoting policy and legislative changes, building upon resources, and fostering partnerships and communication. Project IMPACT is a cooperative agreement between the federal Maternal and Child Health Bureau (MCHB) and the Association of SIDS and Infant Mortality Programs (ASIP), designed to enhance communication among state and local programs and between these programs and federal and state policymakers.

www.sidsprojectimpact.com

South Carolina Community Profiles: a publication of the SC Office of Research and Statistics

The South Carolina Community Profiles site provides demographic and statistical profiles of South Carolina's communities in order to aid others in designing strategies to enhance our state's assets and meet its challenges.

www.sccommunityprofiles.org

South Carolina Kids Count

The reports identify several dozen problems that measure the condition of our children in six major areas: families, economic status, health, readiness and early school performance, student achievement, and adolescent risk behaviors. Additional special perspectives are provided in analysis of demographics, male-female differences, African-American children, and trends. The report shows that much remains to be done. Too

many babies are born to young, at-risk mothers. Too many children are growing up in struggling, impoverished families. Too many children need health care. Too many children are not adequately prepared to start school. Too many children are not successful in school. And too many youth engage in risky behaviors.

www.skidscount.org

Centers for Disease Control and Prevention (CDC)

The Centers for Disease Control and Prevention (CDC) is recognized as the lead federal agency for protecting the health and safety of people - at home and abroad, providing credible information to enhance health decisions, and promoting health through strong partnerships. CDC serves as the national focus for developing and applying disease prevention and control, environmental health, and health promotion and education activities designed to improve the health of the people of the United States.

www.cdc.gov

National Institute of Child Health and Human Development (NICHD)

The mission of the NICHD is to ensure that every person is born healthy and wanted, that women suffer no harmful effects from reproductive processes, and that all children have the chance to achieve their full potential for healthy and productive lives, free from disease or disability, and to ensure the health, productivity, independence, and well-being of all people through optimal rehabilitation.

www.nichd.nih.gov

South Carolina Department of Health and Environmental Control (SCDHEC) **South Carolina Community Assessment Network (SCAN)**

South Carolina Community Assessment Network (SCAN) is an interactive data retrieval system for community assessment, planning and health practices. Users can create tables, charts, and maps according to their interests and specifications at Health District, County, or Zip Code level. Birth Certificate Data, Death Certificate Data, and demographics are the first datasets available on the SCAN system. Newer datasets include PRAMS (Pregnancy Risk Assessment Monitoring System), Pregnancy data, Fetal Death data, Mother's Health and Lifestyle data, Infant and Child Health data, Infant Mortality data, Childhood Lead Poisoning, Cancer Incidence data from the SC Central Cancer Registry (SCCCR) and Live Birth Infant Death Cohort data.

<http://scangis.dhec.sc.gov/scan>

TERMS AND CONDITIONS:

1. Contractor must agree to make positive efforts to use small and minority owned businesses and individuals. DHEC Form 128 is for use in providing his information.
2. None of the work or services covered by this Contract shall be subcontracted without the prior written approval of DHEC.
3. Any change to this Contract is considered an amendment to the contract, which must be mutually agreed to and executed in the same manner as the contract.
4. Records with respect to all matters covered by this Contract shall be retained by the Contractor for 6 years after the end of the Contract period, and shall be available for audit and inspection for any time such audit is deemed necessary by DHEC. If audit has begun but is not completed at the end of the 6-year period, or if audit findings have not been resolved at the end of the 6-year period, the records shall be retained until resolution of the audit findings.
5. Termination Clauses:
 - a. Subject to the provisions contained below, this Contract may be terminated by either party providing written notice of that intent to the Contractor thirty (30) days in advance.
 - b. Funds for this Contract are payable from State and/or Federal and/or other appropriations. In the event sufficient appropriations are not made to pay the charges under this Contract, it shall terminate without any further obligation by DHEC.
 - c. DHEC may terminate this Contract for cause, default or negligence on the part of the Contractor at any time without thirty days advance written notice.
6. No person shall be excluded from participation in, be denied the benefits of, or be subjected to discrimination in relation to activities carried out under this contract on the grounds of race, age, health status, handicap, color, sex, religion or national origin. This includes the provision of language assistance services to individuals of limited English proficiency eligible for services provided by DHEC.
7. Each of the parties agrees to maintain professional, malpractice and general liability insurance, and may be required to provide the other with satisfactory evidence of such coverage. Neither party will provide individual coverage for the other party's employees, with each party being responsible for coverage of its respective employees.
8. The Contractor certifies that he/she will not engage in the unlawful manufacture, distribution, dispensation, possession, or use of a controlled

substance in the performance of this contract. This certification also applies to any individual employee by the Contractor.

9. Contractor's travel expenses, including room and board, incurred in connection with the services described in Scope of Services will be limited to reimbursement at the standard State rate in effect during the period of this agreement and will be included within the maximum amount of the contract.
10. Neither party shall be liable for any claims, demands, expenses, liabilities and losses (including reasonable attorney's fees) which may arise out of any acts or failures to act by the other party, its employee or agents, in connection with the performance of services pursuant to this contract.
11. The agreement and any dispute, claim, or controversy related to the agreement shall, in all respects, be interpreted, construed, enforced and covered by and under the laws of the state of South Carolina. All disputes, claims or controversies relating to the agreement shall be resolved in accordance with the South Carolina Procurement Code, Section 11-35-10, et. Seg., and the contractor agrees to subject himself to the jurisdiction and process of the courts of the State of South Carolina.
12. Contractor certifies that they have not been debarred or suspended under OMB Circular A-133 Compliance Supplement or otherwise from doing business with any governmental entity.
13. DHEC shall have sole ownership and copyright for any tangible product (report, survey, film, etc.) developed under this contract.
14. All services listed within this Contract are to be completed. In the event that all services are not fully rendered as provided for in the Contract, any monies that have been paid by DHEC under the Contract must be refunded to DHEC.
15. All Contractors (subrecipients), except for-profit entities whose fiscal year ends after December 31, 2003, shall have a single or program-specific audit conducted for that fiscal year if they expend \$500,000 or more in Federal awards from all sources during their fiscal year in accordance with the provisions of Office of Management and Budget (OMB) Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, dated June 27, 2003.

The Audit shall be completed and submitted within the earlier of 30 days after receipt of the auditor's reports(s), or nine months after the end of the audit period. The Contractor (sub recipient) agrees to send one copy of any audit conducted under the provisions of OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, dated June 27,

2003, to: SC DHEC, Office of Internal Audits, 2600 Bull Street, Columbia, SC 29201.

Entities, which are audited as part of the State of South Carolina Statewide Single Audit, are not required to furnish a copy of that audit report to DHEC's Office of Internal Audits.

Non-Federal entities that expend less than \$500,000 a year in total Federal awards, from all sources, are exempt from the Federal audit requirements of OMB Circular A-133 for that year, but records must be available for review or audit by appropriate officials of the Federal agency, pass-through entity, and General Accounting Office (GAO).

A Contractor (sub recipient) is prohibited from charging the cost of an audit to Federal Awards if the contractor expended less than \$500,000 from all sources of federal funding in the contractor's fiscal year. If the contractor expends less than \$500,000 in federal funding from all sources in the contractor's fiscal year, but obtains an audit paid for by non-federal funding, then DHEC requests a copy of that audit to be sent to: SC DHEC, Division of Perinatal Systems, Box 101106 Columbia, SC 29211.

As a sub recipient, if you utilize an indirect cost rate, you must provide:

- a. a copy of the approved indirect cost rate letter from your federal cognizant agency.
- OR
- b. an indirect cost rate **reviewed and approved** by an external auditor in accordance with GAAP

Otherwise, only direct charges will be allowed under the terms and conditions of this contract.

- 16. Contractors who are not required to obtain a single or program specific audit may be required to obtain limited scope audits if the quarterly compliance reports, site visits and other information obtained by the department raise reasonable concern regarding compliance with contract conditions. Such engagements may not be paid for by DHEC pass through funds.
- 17. The Contractor agrees to abide by DHEC's policy of confidentiality, which states that all information as to personal facts and circumstances given or made available to employees/volunteers and/or contractors of DHEC in administration of programs shall be held confidential and shall not be divulged without consent of the programs and services and individual(s) to which it pertains. Confidential agency information and action shall not be divulged.

Certain information received by DHEC may not be released pursuant to the Family Privacy Protection Act. Information that is otherwise available to the public under the Freedom of Information Act may be released in

accordance with State law. Should information identify a DHEC client or employee, it may not be released outside of the agency except upon receipt

of a properly completed authorization signed by the individual or his/her parent or guardian. If information is released pursuant to the receipt of a properly completed authorization, documentation of the release must be maintained. A copy of the authorization must be included in this documentation.

Protected Health Information generally cannot be released except pursuant to a proper authorization by the client or his/her parent or guardian, or pursuant to a specific exception under the Health Insurance Portability and Accountability Act (HIPAA) 45 CFR Parts 160 and 164. DHEC may conduct routine audits of health records to ensure compliance with this procedure.

Any unauthorized disclosure of confidential information may result in termination of this contractual relationship with DHEC and may be grounds for fines, penalties, imprisonment, civil suit, or debarment from doing business with the State.

The Contracting Party shall immediately notify the District Medical Director and DHEC HIPAA Privacy Officer of any possible breach of privacy or security of DHEC client's protected health information under the HIPAA Privacy Rule or applicable state law that occurs in the course of performing this Agreement.

The Contracting Party and employees/agents of the Contracting Party will be required to sign DHEC's Confidentiality Agreement (DHEC form #0321), a copy of which is attached hereto.

Alternatively, if the Contracting Party desires to rely upon an existing Confidentiality Agreement signed by its employees/agents, a copy of the Confidentiality Agreement must first be provided to the DHEC Contract Officer for evaluation, and the Contracting Party must provide verification that all employee/agents obtaining access to DHEC confidential information in the course of performing this agreement have executed the Confidentiality Agreement.

- a. Prior to participating in any DHEC clinical activity or rendering any service to DHEC under this Agreement, the Contracting Party and employee/agents of the Contracting Party will be educated and trained regarding the Health Insurance Portability and Accountability Act of 1996 and related Regulations pertaining to the privacy and security of protected health information (the HIPAA Privacy Rule.) The Contracting Party will provide documentation of successful completion of this training to the Contract Officer prior to initiating performance of this Agreement. If this training has not been conducted, or documentation of training has not been provided, the Contracting Party and its employees/agents will be required to view DHEC's HIPAA training video(s) and receive necessary instruction on the DHEC forms referenced in the training prior to initiating performance of this Agreement.

18. The provisions of the Contract are contingent upon any possible revision of State or Federal regulations and requirements of the South Carolina Division of Perinatal Systems.
19. Title to any equipment, goods, software, or database whose acquisition cost is borne wholly or in part by this contract shall vest in DHEC upon acquisition.
20. The parties agree that during the term of this Contract, each party shall maintain its respective federal and state licenses, certifications, and accreditations required for the provision of services therein.
21. DHEC and the contractor agree to assume responsibility and liability for their respective actions, and for the actions of their employees.
22. State Agencies who are awarded must remember to follow State Procurement guidelines.
23. State employees who bid on DHEC contracts for profit must:
 - a. Have a Federal Identification Number (FEIN) in their bid response.
 - b. Include a copy of the "Request for Approval of Outside Employment Request Form" signed by their supervisor in case they are the low bidder and are awarded the contract or provide a copy within five days from written or verbal request.
 - c. The employee MUST NOT be involved in the procurement process in any way and the employee MUST NOT have access to confidential information regarding the contract that is not available to all vendors bidding on the contract. Additionally, the employee MUST NOT use DHEC resources to prepare the bid or in the performance of the contract unless it is authorized as part of the contract.

DHEC Confidentiality Agreement

I understand that the South Carolina Department of Health and Environmental Control (DHEC) has a legal and ethical responsibility to maintain confidentiality of information as to personal facts and circumstances of DHEC clients, employees, or other citizens given or made available to DHEC in administration of the agency's programs and services.

DHEC's Confidentiality Policy states that Information about personal facts and circumstances of DHEC employees and clients will be kept confidential and will not be disclosed without the individual's written authorization, except as required by law. Protected Health Information that identifies an individual generally cannot be released unless properly authorized by the client or his/her legal representative, or pursuant to a specific exception under the Health Insurance Portability and Accountability Act (45 CFR Parts 160 and 164). The Family Privacy Protection Act may place additional limitations on disclosure of personal information.

Information that is made available to the public under the Freedom of Information Act must be disclosed in accordance with State law. However, the Freedom of Information Act protects information of a personal nature such that public disclosure would constitute an unreasonable invasion of privacy. The types of information that generally must be kept confidential include, but are not limited to: protected personal information of job applicants or DHEC employees, vital records information, social security numbers, and health information that identify individuals.

I understand that during the course of my employment, volunteer services, or contract performance with DHEC, I may see or hear confidential information and/or protected health information.

By signing this agreement, I understand and agree that I will not disclose confidential information or protected health information unless the disclosure complies with DHEC policies and is required to perform my responsibilities. I will not access or view any information other than what is required to do my job. If I have any questions about whether I need access to certain information, or whether certain information should be disclosed, I will immediately ask my supervisor for clarification.

I will not discuss any confidential information or protected health information obtained in the course of my relationship with DHEC with any person or in any location outside of my area of responsibility in DHEC, except as otherwise required or permitted by law. I will not make any unauthorized copy or disclosure of this information, or remove or transfer this information to any unauthorized location.

I agree that my obligations under this Agreement regarding confidential and protected health information will continue after termination of my employment/volunteer assignment/contract affiliation with DHEC.

I understand that violation of this Agreement may result in termination of my volunteer, contractual and/or work relationship with DHEC and may be grounds for disciplinary action, fines, penalties, imprisonment or civil suit to be brought against me.

I have read the above Agreement and agree to comply with all its terms.

Signature: _____

Date: _____

Witness: _____

Date: _____

Work Location: _____